

Briefing note – timetable for updating the Academy of Medical Royal Colleges report on Lay Involvement in Revalidation

1. INTRODUCTION

This briefing note is to inform you that the Academy of Medical Royal Colleges intends to update its report on lay involvement in revalidation later this year and would value your contribution to the updating exercise. The last version was published in December 2017. Please see [lay-involvement-in-revalidation](#)

The aim of the report is to share examples of patient and public involvement in revalidation, recognising the important contribution it can make to revalidation processes and to encourage organisations to increase the opportunities for lay involvement. The first report on lay involvement was produced in 2016 and was subsequently updated, based on a survey conducted during the summer/autumn of 2017, which again collected information on lay involvement in revalidation activities at national, regional and local level.

The report contains many different examples of lay involvement, across different types of health organisations. This updating exercise will seek information on any changes to the existing examples, in addition to seeking new examples to add to the report.

This briefing note is to make ROs/DBs and other revalidation bodies aware of the survey timetable and when we will be asking for up to date information on lay involvement initiatives/developments.

2. NEW INITIATIVES/DEVELOPMENTS ON LAY INVOLVEMENT

Since the Academy report on lay involvement in revalidation was published in 2017, a number of initiatives/developments have taken place that have sought to provide further information on lay involvement, but also encourage ROs and DBs, who currently do not include lay representation within their revalidation processes, to review and reflect on the situation with a view to increasing such involvement.

These initiatives/developments include

a. General Medical Council

The updating of the GMC website

- With a new standalone webpage about involving patients in revalidation. <https://www.gmc-uk.org/registration-and-licensing/managing-your-registration/revalidation/revalidation-resources/involving-patients-in-revalidation> including a link to a narrative about revalidation aimed at patients encouraging organisations to use this, and also a set of PPI case studies.
- The narrative in <https://www.gmc-uk.org/registration-and-licensing/managing-your-registration/revalidation/how-do-we-check-doctors-are-giving-good-care> for the public also mentions the PPI case studies as examples they can look at.
- The revalidation resources page has also been updated: <https://www.gmc-uk.org/registration-and-licensing/managing-your-registration/revalidation/revalidation->

[resources](#) This now has a resource tab titled 'Involving patients in revalidation' with a link to the new webpage and also the PPI case studies directly.

- The GMC are also now encouraging organisations to let them know about any examples they have of patient public involvement through their ELA.

- The new Revalidation webpages also link to Sir Keith Pearson's report "Taking Revalidation Forward" (TRF) and the joint stakeholder action plan, which sets an objective to 'increase patient/public awareness of, and involvement in, revalidation' and a link to the Academy report

- The GMC and partners are developing an approach to tracking revalidation in response to Sir Keith's recommendation to track the impact of revalidation on patient safety and care. The measures, being considered as part for the approach, cover a wide range of aspects of revalidation including whether designated bodies involve lay persons in their revalidation processes. The approach is expected to be finalised in summer.

- The document "Effective governance to support medical revalidation - a handbook for boards and governing bodies" is currently being revised (with a publication timetable for Autumn 2018). The draft document emphasises the role that lay representation can contribute to the revalidation process. This guidance document is produced collaboratively by the GMC and health bodies in England, Scotland and Wales and (subject to consultation with stakeholders) contains the following good practice paragraphs which are relevant to lay involvement:

- *Good practice: seeking to publicly promote your commitment to fostering good professional practice. For example, by publicising and promoting your processes for ensuring that doctors are up to date and fit to practise, and considering how you can utilise and work with local patient groups to achieve this.*

- *Good Practice; a suitably qualified and trained Non-Executive Director has a specific role, on behalf of your governing body, providing support and challenge on revalidation, the management of concerns, and other clinical governance processes.*

- *Good practice: organisations involve lay representation in their quality assurance processes, to provide independent scrutiny and challenge, and to increase public confidence that local governance is robust*

b. UMBRELLA REPORT - Evaluating the regulatory impact of medical revalidation

The final UMBRELLA report commissioned by the GMC has been published and provides a commentary on lay involvement in revalidation under section 3.6 "Are Patients being effectively and meaningfully engaged in the revalidation process" (Pages 54 – 60). The section covers different aspects of lay and patient involvement and provides positive remarks in the "Discussion" section which *says "The PPI workstream in the GMC's response to the Pearson report seeks to understand this area further. There is much to celebrate as well including some examples of good practice in PPI across the UK, but there remains scope for developing more consistent, sustainable and meaningful engagement of patients in revalidation"*

c. NHS Improvement

As part of the joint stakeholder action plan (in response to the Pearson report) NHS Improvement have issued advice which states *"There is broad support for lay involvement in medical revalidation. Please ensure you are familiar with the information in the report and reflect on your systems for recruiting, training and briefing lay representatives to support revalidation."*

NHSI also plans to raise awareness and support for lay involvement for future education and learning event for trust medical director and boards

d. NHS ENGLAND

NHS England has produced new Guidance to ROs in a document entitled "Protecting patients, supporting professionalism, improving quality: addressing concerns about medical practice. As part of the guidance it is suggested that the responsible officer *"will often find support in decision-making helpful, and adds objectivity to their decisions. This can be achieved ad hoc with*

input from the sorts of resource listed in Box 3, (this lists a range of organisations/contacts) or via a formally constituted advisory group (Appendix F) The Terms of Reference includes lay involvement on the Advisory Group “to support the role of the RO provides the opportunity for greater calibration of decision-making and the involvement of lay members. The group will provide input to the decision-making with regard to appraisal, revalidation recommendations, performance concerns about doctors, employment processes and any other aspects relevant to the RO Regulations”

e. NHS PROVIDERS

Information in the NHS Providers March 2018 edition of Governors News provides a link to the Academy report. The Newsletter highlights the growing involvement of lay representatives in quality assurance and governance roles in the revalidation of doctors and the support for lay involvement, which is being encouraged by the Academy, GMC and NHS England.

f. ROYAL COLLEGE OF PHYSICIANS AND ACADEMY PATIENT FEEDBACK GROUP

The RCPL/Academy report on Patient Feedback [Improving-patient-feedback-for-doctors](#) also highlights the need for greater patient engagement. There are 2 specific elements embedded into the recommended model. The first is to employ patient feedback champions. Being a Patient Feedback champion is a role that would easily fit within the lay representative role. The second is for organisations to provide organisational level reporting of the outcomes of patient feedback about doctors to the organisations local Patient and Public Involvement group. This will require changes to infrastructure and processes in general.

3. SURVEY TIMETABLE

The updating survey will be launched at the beginning of September 2018 via Survey Monkey and will be open for five weeks. The survey questions will be kept as straightforward as possible in seeking information on changes to the existing list and any new examples.

4. INCREASING LAY INVOLVEMENT

The initiatives and developments listed in this report provide strong encouragement, to Responsible Officers/Designated Bodies and others to increase their lay involvement in revalidation. It is therefore hoped, that this encouragement is seen as an opportunity to review current lay involvement arrangements and to consider whether any new initiatives could be introduced.

We look forward to receiving positive contributions to the September 2018 survey, with examples of lay involvement that we can share in the updated report.

The contacts regarding this briefing note and the survey are Yvonne Livesey at the Academy yvonne.livesey@aomrc.org.uk Sol Mead on sol.mead@nhs.net or sol.mead@btinternet.com